

UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications *under* 37 C.F.R. § 1.53(b))

Attorney Docket No.	P112554
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First Inventor or Application Identifier	Alvin L. Neeley
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Title	MANHOLE COVER LIFTING APPARATUS AND METHOD
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Express Mail Label No.	EL372451820US
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APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington DC 20211

1.  *Fee Transmittal Form (e.g., PTO/SB117)
(Submit one original and a *duplicate* for fee processing)
2.  Specification [Total Pages 26]
- Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if *filed*)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure

3.  Drawing(s) (35 U.S.C. 113) [Total Sheets 7]
4. Oath or Declaration [Total Pages 33]

- a. ☐ Newly executed (original or copy)
- b. ☒ Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)

☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

5. ☐ Microfiche Computer Program (*Appendix*)
6. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
- a. ☐ Computer Readable Copy
- b. ☐ Paper Copy (identical to computer copy)
- c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & document(s))
8. ☐ 37 C.F.R. §3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
9. ☐ English Translation Document (if applicable)
10. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
11. ☒ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
* Small Entity
13. ☐ Statement(s) ☒ Statement filed in prior application, Status still proper and desired
(PTO/SB/09-12)
14. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
15. ☒ Other: Transmittal Letter w/ Express Cert. of Mailing

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)
Prior application in formation: Examiner Underwood, D.

of prior application No: 09/233,417

Group I Art Unit - 3652

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

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or ☒ Correspondence address below

(Insert Customer No or Attach bar code label here)

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	Hughes & Schacht P.S.

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98225

Country	U.S.
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Name (Print/Type)

Mike Hughes

Registration No. (Attorney/Agent)

41,084

Signature

Date _____

November 15, 1999

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

LAW OFFICES OF
HUGHES & SCHACHT, P.S.

A PROFESSIONAL SERVICE CORPORATION

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PATENT, TRADEMARK
& COPYRIGHT LAW

Assistant Commissioner for Patents
U.S. Patent and Trademark Office
Washington, D.C. 20231

November 15, 1999
Docket No. P112554

Sir:

Transmitted herewith for filing is a Continuation patent application of:

Applicants: Alvin L. Neeley & Steven M. Davis
Title: MANHOLE COVER LIFTING APPARATUS AND METHOD

This Continuation Patent Application is claiming priority benefit of U.S. Serial Number(s) and Filing Date(s):

09/233,417	01/19/99
08/625,698	04/03/96
08/489,360	06/12/95

1. Enclosed are:

- a) **Certificate of Express Mailing requesting treatment under 37 CFR 1.10, Express Mail Filing Date of November 15, 1999, Label No. EL372451820US;**
- b) 1-page Utility Patent Application Transmittal;
- c) 1-page Fee Transmittal (original and a copy);
- d) 33-page Copy of Parent U.S.S.N. 09/233,417 (Specification, Claims, Abstract and Informal Drawings);
- e) 2-page Preliminary Amendment;
- f) 4-page Copy of Executed Combined Declaration and Power of Attorney from grandparent application (U.S.S.N. 08/625,698);
- g) 2-page Copy of Executed Verified Statement Claiming Small Entity Status (Independent Inventor) from grandparent application (U.S.S.N. 08/625,698);
- h) A check in the amount of \$380 for Filing Fee; and
- i) A stamped return receipt postcard.

EXPRESS MAIL CERTIFICATE OF MAILING
37 C.F.R. §1.10

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service, Express Mail Post Office to Addressee, in an envelope addressed to BOX PATENT APPLICATION, Assistant Commissioner for Patents, Washington, DC 20231, on the date shown below.

Express Mail No: EL372451820US

Signature: 

Print Name: ROBIN R. FRY

DATE MAILED: November 15, 1999

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL		Complete if Known			
<div style="text-align: center; font-size: 1.5em; font-weight: bold;">for FY 1999</div> <p style="font-size: 0.8em;">Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.</p> <table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width: 50%;">TOTAL AMOUNT OF PAYMENT</td><td style="width: 50%; text-align: right;">\$ 380.00</td></tr></table>		TOTAL AMOUNT OF PAYMENT	\$ 380.00	Application Number	
		TOTAL AMOUNT OF PAYMENT	\$ 380.00		
		Filing Date	November 15, 1999		
		First Named Inventor	Mr. Steve Davis		
		Examiner Name			
Group / Art Unit					
		Attorney Docket No.	P112554		

J-561 U.S. PTO
09/440149
11/15/99

METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																																																																																																																																																																												
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit any overpayment to the account stated below.</p> <p>Deposit Account Number: 08-3260</p> <p>Deposit Account Name: </p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p style="text-align: center; font-weight: bold;">FEE CALCULATION</p> <p>1. BASIC FILING</p> <table border="1" style="width:100%; border-collapse: collapse; font-size: 0.8em;"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Code (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101</td><td>760</td><td>201</td><td>380 Utility filing fee</td><td>380.00</td></tr><tr><td>106</td><td>310</td><td>206</td><td>155 Design filing fee</td><td></td></tr><tr><td>107</td><td>480</td><td>207</td><td>240 Plant filing fee</td><td></td></tr><tr><td>108</td><td>760</td><td>208</td><td>380 Reissue filing fee</td><td></td></tr><tr><td>114</td><td>150</td><td>214</td><td>75 Provisional filing fee</td><td></td></tr><tr><td colspan="4" style="text-align: right;">SUBTOTAL(1)</td><td>\$ 380.00</td></tr></tbody></table> <p>2. EXTRA CLAIM FEES</p> <table border="1" style="width:100%; border-collapse: collapse; font-size: 0.8em;"><thead><tr><th>Total Claims</th><th>Extra Claims</th><th>Fee from below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>20</td><td>-20 = 0</td><td>X 9.00</td><td>\$ 0.00</td></tr><tr><td>2</td><td>-3 = 0</td><td>X 39.00</td><td>\$ 0.00</td></tr><tr><td colspan="2">Multiple Dependent</td><td>none</td><td>\$ 0.00</td></tr></tbody></table> <p><i>**or number previously paid, if greater. For Reissues, see below</i></p> <table border="1" style="width:100%; border-collapse: collapse; font-size: 0.8em;"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Code (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>103</td><td>18</td><td>203</td><td>9 Claims in excess of 20</td><td></td></tr><tr><td>102</td><td>78</td><td>202</td><td>39 Independent claims in excess of 3</td><td></td></tr><tr><td>104</td><td>260</td><td>204</td><td>130 Multiple dependent claim, if not paid</td><td></td></tr><tr><td>109</td><td>78</td><td>209</td><td>39 ** Reissue independent claims over original patent</td><td></td></tr><tr><td>110</td><td>18</td><td>210</td><td>9 ** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="4" style="text-align: right;">SUBTOTAL(2)</td><td>\$ 0.00</td></tr></tbody></table>	Large Entity	Small Entity	Fee Code (\$)	Fee Description	Fee Paid	101	760	201	380 Utility filing fee	380.00	106	310	206	155 Design filing fee		107	480	207	240 Plant filing fee		108	760	208	380 Reissue filing fee		114	150	214	75 Provisional filing fee		SUBTOTAL(1)				\$ 380.00	Total Claims	Extra Claims	Fee from below	Fee Paid	20	-20 = 0	X 9.00	\$ 0.00	2	-3 = 0	X 39.00	\$ 0.00	Multiple Dependent		none	\$ 0.00	Large Entity	Small Entity	Fee Code (\$)	Fee Description	Fee Paid	103	18	203	9 Claims in excess of 20		102	78	202	39 Independent claims in excess of 3		104	260	204	130 Multiple dependent claim, if not paid		109	78	209	39 ** Reissue independent claims over original patent		110	18	210	9 ** Reissue claims in excess of 20 and over original patent		SUBTOTAL(2)				\$ 0.00	<p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Mike Hughes	Registration No. (Attorney/Agent)	41,084
Signature		Telephone	(360)647-1296
		Date	November 15, 1999

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.